RECOMMENDED IMMUNIZATION SCHEDULE FOR CHILDREN AND ADOLESCENTS WHO START LATE OR ARE MORE THAN 1 MONTH BEHIND UNITED STATES • 2006

The tables below give catch-up schedules and minimum intervals between doses for children who have delayed immunizations.

There is no need to restart a vaccine series regardless of the time that has elapsed between doses. Use the table appropriate for the child's age.

		CATCH-UP SCHEDULE FOR CHILDREN AGE	D 4 MONTHS THROUGH	H 6 YEARS		
Vaccine	Minimum Age for Dose 1	Minimum Interval Between Doses				
		Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4	Dose 4 to Dose	
Diphtheria, Tetanus, Pertussis	6 wks	4 weeks	4 weeks	6 months	6 months ¹	
Inactivated Poliovirus	6 wks	4 weeks	4 weeks	4 weeks²		
Hepatitis B³	Birth	4 weeks	8 weeks (and 16 weeks after first dose)			
Measles, Mumps, Rubella	12 mo	4 weeks⁴				
Varicella	12 mo					
Haemophilus influenzae type b⁵	6 wks	4 weeks if first dose given at age <12 months 8 weeks (as final dose) if first dose given at age 12-14 months No further doses needed if first dose given at age ≥15 months	4 weeks ⁶ if current age <12 months 8 weeks (as final dose) ⁶ if current age ≥12 months and second dose given at age <5 months No further doses needed if previous dose given at age ≥15 mo	8 weeks (as final dose) This dose only necessary for children aged 12 months-5 years who received 3 doses before age 12 months		
Pneumococcal ⁷	6 wks	4 weeks if first dose given at age <12 months and current age <24 months 8 weeks (as final dose) if first dose given at age ≥12 months or current age 24–59 months No further doses needed for healthy children if first dose given at age ≥24 months	4 weeks if current age <12 months 8 weeks (as final dose) if current age ≥ 12 months No further doses needed for healthy children if previous dose given at age ≥24 months	8 weeks (as final dose) This dose only necessary for children aged 12 months-5 years who received 3 doses before age 12 months	AAFER HEADTHER FROM LET	

CATCH-UP SCHEDULE FOR CHILDREN AGED 7 YEARS THROUGH 18 YEARS						
Vaccine	Minimum Interval Between Doses					
Vaccine	Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Booster Dose			
Tetanus, Diphtheria®	4 weeks	6 months	6 months if first dose given at age <12 months and current age <11 years; otherwise 5 years			
Inactivated Poliovirus ⁹	4 weeks	4 weeks	IPV ^{2,9}			
Hepatitis B	4 weeks	8 weeks (and 16 weeks after first dose)				
Measles, Mumps, Rubella	4 weeks					
Varicella¹º	4 weeks					

- DTaP. The fifth dose is not necessary if the fourth dose was administered after the fourth birthday.
- 2. IPV. For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if third dose was administered at age 24 years. If both OPV and IPV were administered as part of a series, a total of 4 doses should be given, regardless of the child's current age.
- HepB. Administer the 3-dose series to all children and adolescents<19 years of age if they were not previously vaccinated.
- 4. MMR. The second dose of MMR is recommended routinely at age 4–6 years but may be administered earlier if desired.
- **5. Hib.** Vaccine is not generally recommended for children aged \geq 5 years.

- Hib. If current age < 12 months and the first 2 doses were PRP-OMP (PedvaxHIB® or ComVax® (Merck)), the third (and final) dose should be administered at age 12–15 months and at least 8 weeks after the second dose
- 7. PCV. Vaccine is not generally recommended for children aged ≥5 years.
- 8. Td. Adolescent tetanus, diphtheria, and pertussis vaccine (Tdap) may be substituted for any dose in a primary catch-up series or as a booster if age appropriate for Tdap. A five-year interval from the last Td dose is encouraged when Tdap is used as a booster dose. See ACIP recommendations for further information.
- **9. IPV.** Vaccine is not generally recommended for persons aged \geq 18 years.
- Varicella. Administer the 2-dose series to all susceptible adolescents aged ≥13 years.

Report adverse reactions to vaccines through the federal Vaccine Adverse Event Reporting System. For information on reporting reactions following immunization, please visit www.vaers.hhs.gov or call the 24-hour national toll-free information line 800-822-7967. Report suspected cases of vaccine-preventable diseases to your state or local health department. For additional information about vaccines, including precautions and contraindications for immunization and vaccine shortages, please visit the National Immunization Program Website at www.cdc.gov/nip or contact 800-CDC-INFO (800-232-4636)
(In English, En Español — 24/T)